



HASLEMERE URBAN DISTRICT

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year

1 9 3 8

Incorporating the Annual Report
of the Sanitary Inspector.

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Haslemere Urban District Council.

STAFF of the PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health :

*J. E. HAINE, M.B., Ch.B., D.P.H.

Sanitary Inspector :

JAMES J. SHIRLEY, A.R.San.I., M.S.I.A.

Clerical Staff:

Health Department :

*C. B. STUART (Chief Clerk).

*Miss M. E. NUNN.

Sanitary Inspector's Clerk :

A. R. PRUE.

* Also acts in similar capacity for Guildford Rural District
and Hambledon Rural District.

Haslemere Urban District Council.

PUBLIC HEALTH DEPARTMENT,
MILLMEAD HOUSE,
GUILDFORD.

June, 1939.

*To the Chairman and Members of the Haslemere Urban
District Council.*

Mr. Chairman, Miss Hunter and Gentlemen,

I have the honour to present my Annual Report upon the health of the District for the year 1938.

Once again there has been a marked freedom from infectious diseases. No serious epidemics have occurred, and the comparatively few cases of infection have remained more or less isolated.

The population remains virtually stationary. For the seventh year in succession the number of deaths is greater than the number of births, and it is only by immigration of older people that the population is maintained at its level of approximately 10,000. Being a residential neighbourhood, the average age of the residents is greater than in industrial areas, and it must be expected that births are relatively fewer and deaths relatively more. The Death-Rate is actually a low one and the average age at death in Haslemere proves to be as high as 66.31.

Much progress has been made during 1938 in providing and improving public services. The Hindhead sewage scheme is brought a stage nearer completion, and it is to be hoped that final sanction will be obtained and the work commenced during 1939. The need becomes ever more urgent.

It is with much pleasure that I refer to the cordial spirit of co-operation that exists between the medical practitioners of the district and the Public Health Department. The full assistance of all members of the profession adds greatly to the smooth and efficient running of this public service. I am grateful also for the never-failing friendly assistance of all members of the Council and of the Council staff.

Yours faithfully,

J. E. HAINE,
Medical Officer of Health.

STATISTICS & SOCIAL CONDITIONS OF THE AREA.

SUMMARY.		1938	1937
Area in Acres		5,945	5,945
Estimated resident population in July (estimate supplied by Registrar-General) ...		9,540	9,530
Number of Inhabited Houses (end of year) according to Rate Books		2,631	2,667
Rateable Value	£121,843	£121,354	
A sum represented by a Penny Rate ...	£475	£460	
Number of Births (legitimate and illegitimate)... ..	95	103	
Birth-Rate per 1,000 of the population... ..	9.96	10.81	
Number of Deaths	111	124	
Death-Rate (actual) per 1,000 of the population	11.63	13.11	
Death-Rate for purposes of comparison with other districts	9.38	11.14	
Natural increase of population during the year by excess of births over deaths	Nil	Nil	
Number of Deaths of Infants (under the age of one year)	4	6	
Infant Mortality per 1,000 live births ...	32	48	
Number of women dying in, or in consequence of, child-birth	0	0	
Death-Rate from Influenza per 1,000 of the population	0.42	0.94	
Death Rate from Pneumonia (all forms) per 1,000 of the population... ..	0.62	0.84	
Death-Rate from Bronchitis per 1,000 of the population... ..	0.10	0.63	
Death-Rate from Measles per 1,000 of the population	0.0	0.0	
Death-Rate from the seven principal zymotic diseases: Smallpox, Whooping-cough, Measles, Diphtheria, Diarrhœa, Scarlet Fever and "Fever" (Typhoid, Enteric and Typhus) per 1,000 of the population	0.10	0.32	
Death-Rate from Diarrhœa and Enteritis of children under two years of age per 1,000 births	0.0	0.21	
Death-Rate from all forms of Tuberculosis per 1,000 of the population... ..	0.42	0.63	
Death-Rate from Cancer per 1,000 of the population	1.99	1.15	
Death-Rate from Heart Disease per 1,000 of the population	2.93	3.15	
Death-Rate from Acute and Chronic Nephritis per 1,000 of the population	0.52	0.42	

SOCIAL CONDITIONS

General social conditions in Haslemere have been described in earlier Reports and do not change. The District is mainly residential and there are no industrial areas. Housing and living conditions generally are on a fairly high level. Altitude, climate and surroundings combine to make Haslemere a particularly healthy and desirable place in which to live.

VITAL STATISTICS.

BIRTHS.

95 Live births were registered during the year, as against 103 in 1937.

	Male.	Female.	Total.
Live Births—Legitimate ...	46	45	91
Illegitimate ...	2	2	4
	<hr/> 48	<hr/> 47	<hr/> 95
	<hr/>	<hr/>	<hr/>

BIRTH-RATE per 1,000 of the estimated
resident population 9.96

The birth-rate for 1937 was 10.81. The 1938 rate thus shows a decrease.

The graph on page 11 shows the birth-rates for the District for the last eight years, together with the birth-rates for England and Wales.

There were 3 still-births during the year, as against 0 in 1937.

	Male.	Female.	Total.
Still-Births—Legitimate... ..	1	2	3
Illegitimate ...	0	0	0
	<hr/> 1	<hr/> 2	<hr/> 3
	<hr/>	<hr/>	<hr/>

Still-birth rate per 1,000 total (live and
still) births 30.6

DEATHS.

There were 111 deaths registered during 1938 (44 male and 67 female), as against 124 for the previous year. Table on page 10 shows the principal causes of death.

DEATH-RATE per 1,000 of the estimated
resident population 11.63
After correction by the Registrar-General's
factor... .. 9.38

The death-rate for 1937 was 13.11 (or 11.14 after correction by the Registrar-General's factor*). Thus the death-rate for 1938 shows a decrease of 1.48 per 1,000 on the rate for 1937.

The death-rates per 1,000 of the population for the last seven years, together with the death-rates for England and Wales, are shown in the graph on page 11.

The 1938 death-rates of certain specified diseases are set out in the Summary on page 6, together with the rates for 1937.

INFANT MORTALITY.

During 1938 there were 4 deaths of infants under one year of age as compared with 6 in 1937.

	Male.	Female.	Total.
Legitimate	1	2	3
Illegitimate	1	0	1
	<hr/>	<hr/>	<hr/>
	2	2	4
	<hr/>	<hr/>	<hr/>

INFANT MORTALITY RATES.	1938.	1937.
All infants per 1,000 live births... ..	32.1	48.4
Legitimate infants per 1,000 legitimate live births	32.9	49.5
Illegitimate infants per 1,000 illegitimate live births	250.0	500.0
Deaths from measles (all ages)	0	0
„ whooping-cough (all ages)	0	0
„ diarrhoea (under 2 years of age)	0	0.21

MATERNAL MORTALITY.

		Rate per 1,000 total (live and still) births.
Deaths from puerperal sepsis ...	0	0.0
„ other puerperal causes	0	0.0

* The corrected figure indicates what the rate would be had the population of Haslemere age and sex constitution been in the same proportions as the country as a whole. It is thus a figure used for purposes of comparison only.

Table I below shows the birth- and death-rates per 1,000 of the population for the District and for England and Wales for 1937 and 1938.

TABLE I.
COMPARATIVE BIRTH- AND DEATH-RATES.

	Annual Rates per 1,000 of the Population.						Maternal Mortality per 1,000 total Births	
	Birth-Rate		Death-Rate		Infantile Mortality			
	1938	1937	1938	1937	1938	1937	1938	1937
Haslemere U.D.	9.96	10.81	Crude 11.63 Compar-able 9.38	Crude 13.11 Compar-able 11.14	32	48	0.00	0.00
England and Wales	15.1	14.9	11.6	12.4	53	58	2.97	3.23

TABLE II.
CAUSES OF DEATH DURING 1938 (All Ages).
(Figures supplied by the Registrar-General).

Cause of Death.	Male	Female	Total
1. Typhoid and paratyphoid fevers	—	—	—
2. Measles	—	—	—
3. Scarlet fever	—	—	—
4. Whooping-cough	—	—	—
5. Diphtheria	—	1	1
6. Influenza	3	1	4
7. Encephalitis lethargica	—	—	—
8. Cerebro-spinal fever	—	—	—
9. Tuberculosis of respiratory system	2	2	4
10. Other tuberculous diseases	—	—	—
11. Syphilis	—	—	—
12. General paralysis of the insane, tabes dorsalis	—	—	—
13. Cancer, malignant disease	6	13	19
14. Diabetes	—	—	—
15. Cerebral hæmorrhage, etc.	1	5	6
16. Heart disease	12	16	28
17. Aneurysm	—	—	—
18. Other circulatory diseases	3	8	11
19. Bronchitis	—	1	1
20. Pneumonia (all forms)	3	3	6
21. Other respiratory diseases	1	—	1
22. Peptic ulcer	—	—	—
23. Diarrhœa, etc. (under 2 years)	—	—	—
24. Appendicitis	1	—	1
25. Cirrhosis of liver	—	—	—
26. Other diseases of liver, etc.	—	2	2
27. Other digestive diseases	—	3	3
28. Acute and chronic nephritis	1	4	5
29. Puerperal sepsis	—	—	—
30. Other puerperal causes	—	—	—
31. Congenital debility, premature birth, malformations, etc.	2	1	3
32. Senility	1	—	1
33. Suicide	—	—	—
34. Other violence	1	1	2
35. Other defined diseases	7	6	13
36. Causes ill-defined or unknown	—	—	—
All Causes ...	44	67	111

GRAPH SHOWING BIRTH AND DEATH-RATE PER 1,000
OF THE POPULATION FOR THE LAST EIGHT YEARS.

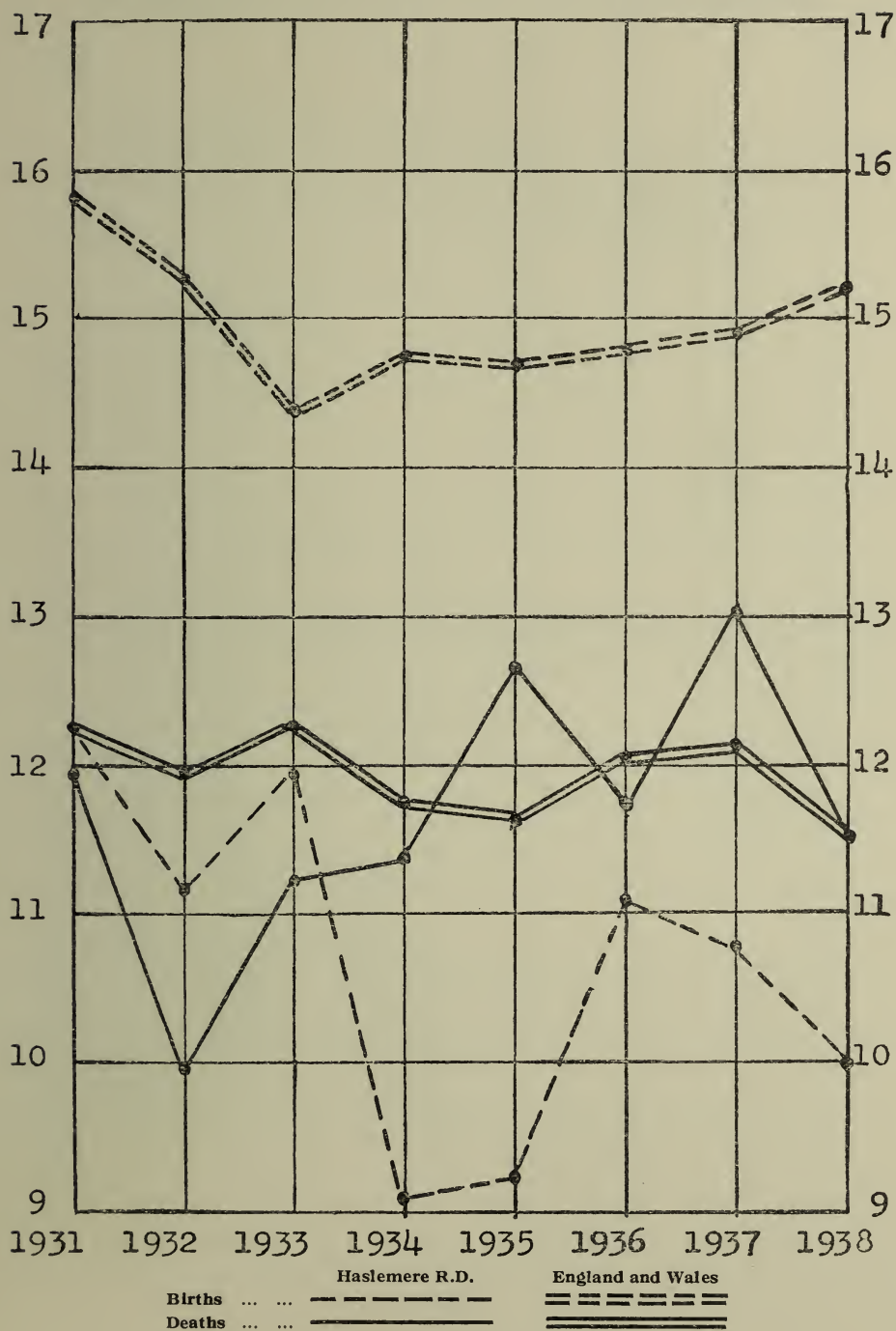


TABLE III.
BIRTH-RATES, DEATH-RATES AND ANALYSIS OF MORTALITY DURING THE YEAR 1938.

	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION								RATE PER 1,000 LIVE BIRTHS	
	Live Births	Still Births	All Causes	Typhoid and Paratyphoid Fevers	Smallpox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Deaths from Diarrhoea & Enteritis (under 2 years)	Total Deaths under One year
England and Wales ...	15.1	0.60	11.6	0.00	0.00	0.04	0.01	0.03	0.07	0.11	5.5	53
126 County Boroughs and Great Towns, including London ...	15.0	0.65	11.7	0.00	—	0.05	0.01	0.03	0.07	0.10	7.8	57
148 Smaller Towns (Estimated Resident populations 25,000 to 50,000 at Census 1931) ...	15.4	0.60	11.0	0.00	0.00	0.03	0.01	0.02	0.06	0.11	3.6	51
London ...	13.4	0.48	11.4	0.00	—	0.06	0.01	0.03	0.05	0.06	13.1	57
Haslemere U.D. ...	9.9	0.31	9.38	0.00	0.00	0.00	0.00	0.00	0.10	0.42	0.0	33
The maternal mortality rates for England and Wales are as follows ...											Total.	
... ..											3.08	
... ..											2.19	
... ..											2.11	
... ..											2.97	

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

LABORATORY FACILITIES.

Pathological Examinations.—All pathological specimens are examined at the Clinical Research Association, London.

The following are the numbers of examinations made during the year :

	1938	1937
Scarlet Fever	10	44
Diphtheria	80	13
Tuberculosis	4	5
Fæces	—	1
Miscellaneous	5	3
	—	—
Totals ...	99	66
	—	—

The small number of examinations for Scarlet Fever is a reflection of the freedom of the District from this type of infection. Apart from a small outbreak in a private school, only a single case was reported.

The very large increase of examinations for diphtheria is the result of the search for possible contacts and carriers in connection with the two cases reported in more detail later in this Report.

Milk Analysis.—This work is carried out by the Clinical Research Association, Limited, Watergate House, York Buildings, Adelphi, London, W.C.2. 43 samples were examined during the year.

Water Analysis.—The Counties Public Health Laboratories, 94, Queen Victoria Street, London, E.C.4, undertake the examination (both bacteriological and chemical) of samples of water taken in this District. During 1938, 38 samples were examined.

AMBULANCE FACILITIES.

Ambulance services are adequate for the needs of the District, and work smoothly and efficiently. Particulars are given below :

(i) Ambulance provided by the Haslemere Urban District Council available for Accident Cases and Cases of a Non-Infectious Character.

Name of Authority	No. of Ambulances	Address of Ambulance Station	Telephone Number
Haslemere Urban District Council	1	Fire Station, Haslemere	Haslemere 291

(ii) Ambulances available for Cases of Infectious Disease.

Name of Authority.	No. of Ambulances	Address of Ambulance Station	Telephone Number
Farnham Joint Isolation Hospital Committee	1	Farnham Joint Isolation Hospital	Farnham 6015

Arrangements are made by the Farnham Isolation Hospital for an alternative vehicle in the case of breakdown or failure from any other cause.

NURSING IN THE HOME.

Midwives.—There are 19 midwives practising in the Urban District supervised by the County Medical Officer of Health. They are distributed in the following parishes :

Haslemere	...	...	...	14	Grayswood	...	...	0
Hindhead	...	...	...	1	Shottermill	...	...	4

District Nurses.—Six district nurses are available—three in Haslemere, one in Hindhead, one in Grayswood, and one in Shottermill. This service is administered by the County Nursing Association.

Health Visitors.—There is in the District a County Health Visitor who visits homes under the School Medical, Maternity and Child Welfare and Tuberculosis Services.

Home Nursing for Public Assistance Cases.—This scheme is operated by the Surrey County Council ; it is most useful, and greatly appreciated.

CLINICS AND TREATMENT CENTRES.

Maternity and Child Welfare.—Centres within the District are as set out in the table below.

Centre	Address	Days of Centre
Haslemere	St. Christopher's Hall, Haslemere	Every Tuesday
Hindhead	Congregational Chapel Rooms, Beacon Hill, Hindhead	Every Friday

Ante-Natal Clinic.—An Ante-natal Clinic is held at the Haslemere Child Welfare Centre on the 2nd and 4th Thursdays in each month.

Orthopædic Clinic.—The Orthopædic Clinic is held at the Royal Surrey County Hospital, Farnham Road, Guildford, on Tuesday afternoons at 2.30 p.m.

In-patient treatment is provided at the St. Nicholas' and St. Martin's Homes at Pyrford.

Surrey Voluntary Association for the Care of Cripples.—The second year of the work of the Surrey Voluntary Association for the Care of Cripples has seen a great increase in the work accomplished.

148 new cases in the County were notified, bringing the total to 525. Necessary treatment has been encouraged and arranged, assistance being given with transport and with the supply of appliances and chairs.

After-care has embraced entry of cripples to Homes as well as efforts to place cripples in suitable training and employment.

Handicraft instruction is also given. Classes are held according to the following time-table :

Mondays.

10 a.m., Weybrooke, White Lane, Guildford. (By kind invitation of Mrs. Hardy).

2.30 p.m., The Mary Yolland Home, Upper Hale, Farnham.

Tuesdays.

10 a.m., Whitebeams, Beech Avenue, Effingham. (By kind invitation of Mrs. Graham).

2.15 p.m., Home visiting instruction.

Fridays.

10 a.m., The Reading Room, Reigate.

2.15 p.m., Hill House Community Centre, Bishopsford Road, Morden.

Assisted by voluntary transport, patients from the Haslemere Urban District are able to attend.

Tuberculosis Dispensaries.—Dispensaries at the Milford Sanatorium and at 49, Farnham Road, Guildford, serve the District. The days and times for the attendance of cases are as follows :

Milford Sanatorium.—2nd and 4th Fridays, 2 to 4 p.m.

49, Farnham Road, Guildford—1st, 3rd and 5th Wednesdays at 10 a.m. Fridays at 10 a.m. 2nd and 4th Wednesdays at 5.30 p.m.

Venereal Diseases Clinic.—A Clinic is held at the Royal Surrey County Hospital, Guildford, three times weekly, as follows :

Mondays, 5 p.m.—(Females).

Thursdays, 5 p.m.—(Males).

Fridays, 5 p.m.—(Males).

All treatment is free, and patients can receive treatment from their own medical attendants, to whom drugs are supplied free of charge.

All of the above-noted clinics are administered by and under the control of the Surrey County Council.

HOSPITALS.

The hospitals serving the Haslemere Urban District are as follows :

General : Haslemere and District Hospital. Haslemere.
(Medical and Surgical. 62 beds.)

Infectious Disease. Farnham Joint Isolation Hospital. (50 beds,
including two 2-bedded wards and 16 single-bedded cubicles).

Clandon Smallpox Isolation Hospital (37 beds).

MORTUARY.

The Council maintains a mortuary at Sickie Mill. It is properly and suitably maintained, and is ample for all requirements. The number of bodies received into the mortuary during 1938 was 9.

HEALTH WEEK.

A Health Week was held again in November, 1938, for the fourth year in succession. In general lines it followed that of the previous year, posters being displayed throughout the District, literature distributed, and public displays being given by the travelling Cinema Van of the Health and Cleanliness Council. By permission of the County Education Committee, special displays were given by this van at all Council Schools.

Interest this year was markedly overshadowed by the September crisis, from the anxieties of which few people had recovered by the end of October. The value of Health Propaganda of this type, however, is not to be measured by immediate results ; it is cumulative, and the rewards are enjoyed only in the future.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

Following the epidemic of typhoid fever at Croydon, and the resultant enormous publicity, questions of water supply have dominated much of the work of 1938. In Haslemere there are two sources of public supply : the Wey Valley Water Company, serving Hindhead and Shottermill, and the Council's own undertaking, which serves the remainder of the District.

In December, 1937, it was decided to increase the frequency of sampling—formerly done quarterly—to monthly, at any rate for bacteriological analysis, and to have chemical analyses made each Spring and Autumn. A thorough survey was also made of both water undertakings, particular attention being paid to circumstances even remotely likely to cause pollution.

Gratitude is expressed to the Chief Engineer of the Wey Valley Water Company for his very willing and cordial co-operation and assistance in the survey affecting that company's supply. The regular receipt of copies of the company's own analyses is also very much appreciated. These are taken fortnightly and in certain cases weekly, and knowledge of this careful supervision gives a feeling of added security with regard to this Company's water.

Copies of all analyses of the company's water taken by the Health Department are similarly forwarded to the Chief Engineer of the Company.

Extracts from the special report prepared as a result of my survey are appended :

WEY VALLEY WATER COMPANY.

1. Area Supplied :

Hindhead and Shottermill.

In addition, this company supplies, in the Guildford Rural District, the parish of Puttenham, and parts of the parishes of Seale and Wanborough, and in the Hambledon Rural District the parishes of Docketfield, Elstead, Frensham, Thursley and Tilford.

2. Sources of Supply :

There are four sources of supply, as follows :

(i) *The Hindhead Pumping Station* near to the highest part of the main road at Hindhead, just behind the hotel and Chandler's garage. The well in use is 250 feet deep and extends into the lower greensand.

Actually, there are two wells in close proximity, with an underground connection. The old well is not in use and at the time of my inspection was not sealed. A concrete cover with a manhole has now been put over the top, effectively closing it. Drains from a watercloset close by the well were tested by hydraulic test, and their absolute impermeability assured.

The drainage of the house and offices at the Wey Valley Water Company's pumping station, Portsmouth Road, Hindhead, was thoroughly examined and tested by the Sanitary Inspector. Various small repairs and improvements were carried out on his advice, and it is proposed to make this an annual inspection.

There are no cesspools within a radius of 500 feet of the well, but just outside this radius are a number of cesspools, 13 or more of which are within a quarter of a mile. In addition, there are three houses with septic tanks, the effluent from which escapes into the soil.

It is impossible for more land around the well to be preserved from building development. The land in the Company's possession is limited to the site of the well, a small yard, and the buildings associated with the well—offices and works.

(ii) *Tower Road Pumping Station.* This is an old well formerly owned by a laundry. It is 275 feet deep and extends to the lower greensand. The upper 50 or 60 feet of the well is lined and new pumps are being installed. This well is situated in a populous area, and there are many sources of possible pollution in the immediate vicinity. Within about 200 yards radius are several large septic tanks and cesspools, amounting in all to nearly a score.

It is impossible for the company to extend the land in their possession around this well, to preserve it from building development, as it is a built-up area.

Work on the installation of a new pump in this well was not completed at the time of inspection, and the water was not in circulation. There are, it is understood, a number of horizontal shafts from this well, so that danger from sewage overflows is increased. These shafts may extend under the roadway—a fact that must be borne in mind when the time comes for sewerage in this area.

(iii) and (iv). The wells and pumping stations at *Tilford Road* and at *Tilford Meads* are in the Hambledon Rural District. A special report has been submitted to that Council covering the possible sources of pollution from cesspools in those areas.

The reservoir on the *Tilford Road*, in which all water is mixed, is ideally situated, remote from all dwellings and with sufficient ground around it in the possession of the Water Company to prevent any encroachment.

So far as is known no actual pollution from cesspools or other drainage has ever arisen, but that is, naturally, no safeguard for the

future. Having regard to the relative infrequency with which cesspools are emptied, there is inevitably some leakage of sewage matter into the surrounding ground. The underground suction from continuously pumping millions of gallons of water may eventually break down the natural filtering qualities of the sandy soil and allow of serious and irremediable pollution. Nor are septic tanks in much better a position. The effluent from an efficiently working system is free from objectionable and putrefiable solid matter, but bacteriologically is probably as dangerous as cesspool overflows.

There is one remedy only in these circumstances—that is main drainage. In Hindhead a scheme has been under discussion for some years, and owing to unavoidable delays and frustrations has not yet materialised. The conditions discovered during this survey emphasise the urgent necessity of completing this drainage scheme as rapidly as possible. Despite all precautions which are being taken the sanitary conditions of this area will continue to constitute a serious menace to the continued purity of the public water supply until the sewerage scheme is in operation. At present the excellent and careful management of the company's engineering staff, combined with frequent bacteriological analyses, constitutes the best safeguard.

No pollution of the water supply has been discovered at any time.

3. Chlorination :

Chlorination is not provided for at any of the pumping stations, nor at the reservoir where the waters are mixed. When one remembers the suddenness with which contamination does occur, and that chlorination is, at present, the only satisfactory remedy, it might seem desirable that a chlorinating plant should be on the spot so that, in case of emergency, it could be brought into use at the shortest possible notice. On the other hand, having four separate pumping stations, any one found to be polluted could be taken out of circulation without creating a shortage of supplies.

I therefore see no reason for suggesting that chlorination should be applied at present.

4. General Notes :

At my suggestion the company had all the men employed regularly on the wells, or on work which might bring them in contact with the water, examined thoroughly as regards their general health and for the possibility of anyone being a carrier of typhoid bacilli. The results were negative in every case.

HASLEMERE URBAN DISTRICT COUNCIL SUPPLY.

The Council's water supply has throughout the year been treated with a small dose of chlorine—0.2 parts per million. Analyses of raw water and of the chlorinated water were satisfactory with the

exception of a brief interval in October, when a breakdown in the chlorinating arrangements coincided with temporary deterioration in the quality of the raw water. There appears to be little doubt that this deterioration was due to storms and heavy rains. It was of a temporary nature, lasting only a few days, and since that one occasion has not been repeated.

As a result of this experience steps were taken so far as possible to eliminate any risk of another breakdown of chlorination, and the dosage of chlorine was somewhat increased. At the same time, a special survey of the water undertaking was called for. Dr. E. V. Suckling, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H., was asked to undertake this with the special object of discovering possible sources of pollution and preventing recurrences. Bad weather prevented this survey from being made before January 2nd, 1939, and Dr. Suckling's report has not yet been received.

There is no reason for anxiety about the public water supply, since the quality of the raw water is being carefully watched, and chlorination regularly applied.

DRAINAGE AND SEWERAGE.

The small sewage disposal works at Grayswood continues to function with complete satisfaction. The effluent is clear, and the watercourse into which it flows remains free from any sign of pollution.

Eight Acres Sewage Disposal Works.—The disposal works for the 52 houses on this estate has functioned satisfactorily. The effluent is good, and no difficulties have been experienced in connection with its disposal in the stream.

Shottermill Sewage Works.—During the year a certain amount of difficulty has arisen owing to the large quantities of sludge, and we were unable to draw off any appreciable quantity of water. The effluent was not continuously satisfactory and certain steps were taken to effect improvement. As a result of the observations made during the working of the plant the Council's Consulting Engineer designed humus tanks, a sludge dewatering tank, and arranged to increase the capacity of the sprinklers.

Hindhead Drainage Scheme.—The main drainage scheme for Hindhead has made progress during the year. Detailed plans and estimates have been prepared, and it is hoped that the Public Inquiry by the Ministry of Health will not create undue delay. The necessity for the scheme becomes increasingly urgent as time goes on, and there is no other way of removing the dangers to health of the present conservative system.

The proposals cover in effect the whole of the area west of the London-Portsmouth Road and when completed will leave but comparatively few cesspools in the District (probably about 105).

Copy.

HASLEMERE URBAN DISTRICT COUNCIL WATER SUPPLY.

Copy of Report from The Counties Public Health Laboratories,
91 Queen Victoria Street,
London, E.C.4.
26th March, 1938.

Analysis of a Sample of Water received on 21-3-38 from Haslemere Urban District Council.

Labelled—"Main Tap: Alder Shaw," Chase Lane, Haslemere.
Date 21-3-38. Time 11.30 a.m.

Taken by James J. Shirley. Witness, Mrs. Shirley. Signed, James J. Shirley.

Chemical Results in Parts per 100,000.

Appearance	...	...	...	Clear and Bright.
Colour	...	...	...	Normal. Odour, Nil.
Reaction pH	...	...	...	Faint Acid, 6.6. Free Carbonic Acid, 1.0.
Electric Conductivity at 20°C.	...	...	...	140 Total Solids, dried at 180°C.
Chlorine in Chlorides	...	...	1.9	
Hardness: Total	...	...	4.5	Temporary 0.5. Permanent 4.0.
Nitrogen in Nitrates	...	...	0.16	Nitrites, Absent.
Free Ammonia	...	...	0.0000	Ammoniacal Nitrogen ... 0
Albuminoid Ammonia	...	...	0.0000	Albuminoid Nitrogen ... 0
Oxygen absorbed in 4 hours at 80°F.	...	...	...	0.000
Metals	...	...	...	Absent.

Bacteriological Results.

Number of Bacteria growing on Agar per cc. or ml.

In 1 day at 37°C. ... 1

In 2 days at 37°C. ... 1

In 3 days at 20°C. ... 2

The Bacillus Coli ... Present in —. Absent in 100 cc.

Bacillus Welchii ... Present in —. Absent in 100 cc.

(B. Enteritidis Sporogenes)

Report.—This sample is clear and bright and of normal colour. The water is soft in character, contains little saline and mineral matter in solution, and is free from metals.

It is of the highest standard of organic and bacterial purity, and we regard it as pure and wholesome water, suitable for drinking and domestic purposes.

(Signed) ERNEST V. SUCKLING
(for Drs. Beale and Suckling).

Copy.

WEY VALLEY WATER COMPANY.

Copy of Report from The Counties Public Health Laboratories,
91 Queen Victoria Street,
London, E.C.4.
27th September, 1938.

Analysis of a Sample of Water received on 22nd September, 1938,
from Haslemere Urban District Council.

Labelled: "Domestic Tap: Highfield Dairy, Beacon Hill Road
Hindhead." Date 21-9-38. Time, 12 noon.

Taken by James J. Shirley. Witness, T. Baker. Signed, James
J. Shirley.

Chemical Results in Parts per 100,000.

Appearance	...	...	...	Clear and Bright.
Colour	...	...	...	Normal. Odour, Nil.
Reaction pH	...	...	...	Neutral, 7.5. Free Carbonic Acid 0.5.
Electric Conductivity				
at 20°C.	...	...	245	Total Solids, dried at 180°C. ... 16.5
Chlorine in Chlorides	...	1.2		Alkalinity as Calcium Carbonate ... 10.5
Hardness: Total	...	...	11.0	Temporary 8.5. Permanent 2.5.
Nitrogen in Nitrates	...	Nil.		Nitrites, Absent.
Free Ammonia	...	...	0.0000	Ammoniacal Nitrogen ... 0
Albuminoid Ammonia	...	...	0.0000	Albuminoid Nitrogen ... 0
Oxygen absorbed in 4 hours				
at 80°F.	...	...	...	0.000
Metals	...	...	...	Iron, 0.003. Zinc, Absent.

Bacteriological Results.

Number of Bacteria growing on Agar per cc. or ml.

In 1 day at 37°C. ... 2

In 2 days at 37°C. ... 2

In 3 days at 20°C. ... 3

The *Bacillus Coli* ... Present in —. Absent in 100 c.c.

Bacillus Welchii ... Present in —. Absent in 100 c.c.
(*B. Enteritidis Sporogenes*).

Report.—This sample is clear and bright, of normal colour,
neutral in reaction and free from metals apart from a negligible
trace of iron.

The water is of moderate hardness, contains no excess of
saline or mineral matter in solution, and is of a high degree of
organic and bacterial purity.

It is, therefore, considered wholesome in character, and suitable
for drinking and domestic purposes.

(Signed) ERNEST V. SUCKLING.

RIVERS AND STREAMS.

A case of pollution by crude sewage on the Surrey and Sussex boundary stream was discovered.

This proved to be the direct discharge into the stream of the drainage of certain property situate in Sussex, and upon representation to the appropriate local authority this drainage was disconnected from the stream and connected to the sewer.

CLOSET ACCOMMODATION.

During 1938 there were no conservancy systems connected to water carriage systems. The number of earth closets remaining at the end of the year was as follows :—

Grayswood	19
Haslemere	20
Hindhead	112
Hindhead Common ...	8
Shottermill	30

PUBLIC CLEANSING.

The arrangements for removal of nightsoil and cesspool emptying continue to give complete satisfaction. Cesspools are emptied by the Council's cesspool emptier monthly on request. As has been the practice for some years past, a quantity of chlorine is added to the cesspool contents before emptying, thus successfully overcoming the objectionable smell associated with the emptying. It is believed that this also aids the actual disposal of the sewage matter at the works.

REFUSE COLLECTION.

There is a weekly refuse collection throughout the District, all refuse being disposed of in the old clay quarries at Hammer Brickworks.

The approach road leads past the sewage works at Shottermill, and is well away from all populous districts. Controlled tipping is carried out, and the men responsible have been specially trained. There have been no complaints, and the tip is really well managed. Surface water is apt to prove troublesome at times owing to the impermeability of the clay.

SANITARY INSPECTION OF THE AREA.

The Sanitary Inspector has supplied the following figures of inspections made during the year :

Number of inspections and re-inspections of :

Dwelling-houses	456
Other premises	1,892
Number of sundry visits and inspections not included above	154
Total	2,502

Number of dwelling-houses at which nuisances or defects were discovered	52
Number of other premises at which nuisances or defects were discovered	20
Total number of Statutory Notices served	—
Total number of Informal Notices served	36
Number of visits in connection with Infectious Disease... ..	102
Number of rooms disinfected	9

Inspections of other premises :

Premises	No. on Register	No. of Inspections	Nuisances or Defects Found	Notices Served
Slaughter-houses ...	5	276	—	—
Butchers' shops ...	14	193	—	—
Bakehouses	8	146	—	—
Other Food Premises	—	301	2	2
Factories with mechanical power	32	140	2	2
Factories without mechanical power	75	175	—	—
Other Premises ...	1	—	—	—
Cowsheds, Dairies and Milkshops ...	42	445	1	1
Schools	—	30	—	—
Shops	—	21	—	—
Smoke and Fume Observations ...	—	37	2	2
Offensive Trades ...	2	30	—	—
Petroleum and Carbide Stores ...	54	98	—	—

Complaints.—During the year 64 complaints were received. 130 visits were made in the investigation thereof and the necessary action taken.

**REPORT ON THE ADMINISTRATION OF THE FACTORY
AND WORKSHOP ACT, 1901, AND THE FACTORIES
ACT, 1937 (WHICH SUPERSEDED THE ACT OF 1901
ON 1st JULY, 1938).**

**1.—Inspections for purposes of provisions as to health.
Including Inspections made by Sanitary Inspectors.**

Premises (1)	Number of		
	Inspections (2)	Written Notices (3)	Occupiers Prosecuted (4)
Factories with mechanical power	176	2	—
Factories without mechanical power	285	—	—
*Other Premises under the Act (including works of building and engineering construction but not including outworkers premises)	—	—	—
Totals ...	461	2	—

* Electrical stations should be reckoned as factories.

2.—Defects found.

Particulars (1)	Number of Defects			Prosecu- tions Instituted (5)
	Found (2)	Reme- died (3)	Referred to H.M. Inspector (4)	
Want of cleanliness (S.1)	—	—	—	—
Overcrowding (S.2)	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—
Sanitary conveniences (S.7) { Insufficient ...	—	—	—	—
{ Unsuitable or defective ...	—	—	—	—
{ Not separate for sexes	—	—	—	—
Other Offences	2	2	—	—
(Not including offences relating to Home Work or offences under the Sections mentioned in the Sched- ule to the Ministry of Health (Factories and Workshops Trans- fer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937.)				
Total	2	2	—	—

OFFENSIVE TRADES.

The trades of fish-frying and marine storekeeping are declared offensive trades in this District.

There is now no marine store in the District, but there are two fish-frying businesses, and these are conducted in a satisfactory manner, 30 inspections having been made.

BAKEHOUSES.

There are eight bakehouses in the District and 146 visits of inspection were made to ensure that the premises were kept in a satisfactory manner.

SHOPS.

The Sanitary Inspector made 21 inspections under the Shops Act, 1934.

Under this Act the Local Sanitary Authority is responsible for ensuring that there is adequate ventilation, warming and sanitary conveniences, whilst the County Council controls other conditions, including lighting, washing facilities, seating accommodation, hours of employment, etc.

SMOKE ABATEMENT.

A number of complaints were made with regard to the emission of smoke, mainly from one source and concerning the Gas Works. Twenty-five observations were made at the Gas Works and although no contravention of the By-laws occurred during these observations it was apparent that a considerable amount of smoke was emitted. The Company, therefore, was notified and asked to observe strict care and attention in this matter.

The Company showed its willingness to co-operate and special attention was paid to the general activities of the Works but it would no doubt be acknowledged that many of the ovens are nearing the end of a useful life and serious consideration will undoubtedly have to be given by the Company in the near future to the renewal of same.

Twelve observations of other premises were made.

RATS AND MICE (DESTRUCTION) ACT, 1919.

Under this Act, which is primarily administered by the County Council, 24 visits were paid to premises in the District and advice given. Several complaints were referred to the County Rat Officer.

SWIMMING BATHS AND POOLS.

Plans have been prepared for the construction of an open-air swimming pool and children's paddling pool at Camelsdale in conjunction with the recreation ground in course of preparation. The natural setting for this pool is very beautiful, and the facilities for swimming should be of the greatest benefit to the public in and near Haslemere.

SCHOOLS.

The sanitary conditions at the schools are reasonably good.

At Hindhead School the conversion of pail closets to water-closets will, it is hoped, be arranged when a sewer becomes available with the completion of the Hindhead drainage scheme.

It was not necessary to close any of the schools on account of outbreaks of infectious disease.

ERADICATION OF BED BUGS.

No cases have been reported during the year.

As has been stated previously, no examination is made of tenants' belongings before removal to Council houses, in order to ensure freedom from vermin. Cases are of such rare occurrence that the adoption of such a procedure does not appear to be justified.

PETROLEUM (CONSOLIDATION) ACT, 1928.

The Sanitary Inspector, as Petroleum Officer for the District, has supplied the following report :

"There are 50 premises licensed for the storage of Petroleum spirit. From 24 of these petrol is sold, while at the other 26 premises petrol is stored for private use only. Four licences were issued for the storage of carbide of calcium—one for private use and three for the purposes of sale. 98 visits were made in all."

HOUSING.

HOUSING TABLES.

1.—Inspection of Dwelling-houses during the Year :

(1)	(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	381
	(b) Number of inspections made for the purpose ...	456
(2)	(a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	322
	(b) Number of inspections made for the purpose ...	359
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	0
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	27

2.—Remedy of Defects during the Year without Service of Formal Notices :

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	26
--	----

3.—Action under Statutory Powers during the Year :

A.—Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :

(1)	Number of dwelling-houses in respect of which notices were served requiring repairs... ..	0
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :	
	(a) By owners... ..	0
	(b) By Local Authority in default of owners	0

B.—Proceedings under Public Health Acts :

(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	0
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :	
	(a) By owners... ..	0
	(b) By Local Authority in default of owners	0

C.—Proceedings under sections 11 and 13 of the Housing Act, 1936 :

(1) Number of dwelling-houses in respect of which Demolition Orders were made	0
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	0

D.—Proceedings under section 12 of the Housing Act, 1936 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made... ..	0
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	0

4.—Housing Act, 1936. Part IV. Overcrowding.

(a) (i) Number of dwellings overcrowded at the end of the year	3
(ii) Number of families dwelling therein	3
(iii) Number of persons dwelling therein	19
(b) Number of new cases of overcrowding reported during the year	1
(c) (i) Number of cases of overcrowding relieved during the year	4
(ii) Number of persons concerned in such cases... ..	32
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	0
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report	0

The following is included by the courtesy of Mr. Turk, the Financial Officer :—

HASLEMERE URBAN DISTRICT COUNCIL.

Schedule of Council Houses erected under the various Housing Acts and rents charged for the year 1939/40.

Act.	No.	Situation.	Type.	Weekly Nett Rent.	Weekly Rent & Rates.
				s. d.	s. d.
1919	4	East Cottages, Hindhead ...	Parlour	10 10	14 8
	4	West Cottages, Hindhead ...	Parlour	10 10	14 5
	6	Oak Cottages, Critchmere ...	Parlour	10 10	14 8
	6	Oak Cottages, Critchmere ...	Non-Parlour	8 0	10 5
	10	High Lane, Haslemere ...	Parlour	12 6	16 11
	2	St. Christophers Road ...	Parlour	11 6	15 3
1923	12	High Lane, Haslemere ...	Parlour	11 6	15 3
	10	High Lane, Haslemere ...	Non-Parlour	10 0	13 2
	16	High Lane, Haslemere ...	Non-Parlour	9 8	12 2
	6	High Lane, Haslemere ...	Non-Parlour	9 3	11 6
1924	22	Border Cottages, Shottermill ...	Non-Parlour	8 0	10 8
	12	Border Cottages, Shottermill ...	Non-Parlour	8 7	12 2
	16	Eight Acres, Hindhead ...	Non-Parlour	8 2	10 10
	10	Eight Acres, Hindhead ...	Non-Parlour	8 2	11 9
	8	Sandheath Road, Hindhead ...	Non-Parlour	9 7	13 5
1925	22	Eight Acres, Hindhead ...	Non-Parlour	9 6	12 2
	4	Eight Acres, Hindhead ...	Flats	5 6	6 9
	6	Shepherds Hill, Haslemere ...	Bungalows	7 2	8 10
	176				

Sundry Properties let at inclusive weekly rents and not included under the Housing Acts.

No.	Situation.	Inclusive Weekly Rent.
		s. d.
2	Sicklemill Depot, Haslemere ...	6 0
2	Sicklemill Depot, Haslemere ...	6 3
1	Sicklemill Depot, Haslemere ...	9 6
1	Sicklemill Depot, Haslemere ...	14 6
1	Sicklemill Depot, Haslemere ...	15 6
2	Waterworks Cottages, Blackdown ...	10 6
2	Shottermill Sewage Disposal Works ...	6 2
1	West Street Depot ...	12 6
1	Recreation Ground ...	Service tenancy
1	Fire Station ...	Service tenancy
190		

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

At the end of the year there were 9 cowkeepers and 14 milk retailers in the District, whilst 19 retailers from outside sell milk within the District.

445 inspections were made during the year.

43 samples of milk were taken, and the results prove that a high standard is being maintained in this District. Seven samples of pasteurised milk taken and submitted to the Phosphatase test proved satisfactory.

Milk Produced in District. Milk Produced outside District.

Highest bacterial count	144,330	Highest bacterial count	685,000
Lowest	7,030	Lowest	7,600
Average	59,978	Average	93,359

The following licences were granted for the sale of milk under the Milk (Special Designations) Orders :

Dealers' Licences for Tuberculin Tested	...	...	...	3
" " " Accredited	...	...	...	1
" " " Pasteurised	...	...	...	0
Supplementary Licence for Tuberculin Tested	...			2
" " " Pasteurised	...	...	...	1
Licence to Pasteurise Milk...	...	...	...	2

ICE CREAM.

Samples of ice cream are taken each summer from all retailers in the District. In general, the results may be said to be satisfactory.

The three largest purveyors of ice cream manufacture their supplies outside the District, of course. It is known that two, at least, of these companies have their own laboratories and control their manufacture by bacteriological analyses. The public is fairly well protected therefore, although there is no specified standard of purity for ice cream.

Small producer-retailers generally use sufficient heat, during production, virtually to sterilise the mix, but occasional contamination does occur. This is not always from the milk used, but often is from dried products used for the mixture before freezing. Although the low temperature inhibits bacterial growth, it does not, as is often popularly supposed, kill the organisms already present.

Thirteen samples were examined during the year. Two of these were from the big producers and were entirely satisfactory. Nine samples from smaller producers were definitely unsatisfactory, the worst one having a bacterial count of 2,700,000 per c.c. (for comparison it is mentioned that in Pasteurised Milk the legal maximum is 100,000). In every case attention was drawn to the unsatisfactory results, and improvement was effected.

Ice Cream Produced in District.				Ice Cream Produced outside District.			
Highest bacterial count	2,700,000			Highest bacterial count	27,660		
Lowest	„	„	9,100	Lowest	„	„	19,960
Average	„	„	796,532	Average	„	„	23,810

SUMMARY OF SAMPLES.

Articles.	No. of Samples	Examination.	Satis- factory	Unsatis- factory
Milk	38	Bacteriological, by Count ...	30	8
Milk	5	Bacteriological, Typhoid Group	5	—
Milk	7	Phosphatase	7	—
Ice Cream ...	13	Bacteriological	4	9
Totals ...	63		46	17

MEAT AND OTHER FOODS.

Ante- and Post-Mortem Examination of Animals. Carcases Inspected and Condemned.

	Cattle exclud- ing Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed (if known)	127	—	132	1,027	1,011
Number inspected ...	94	—	119	925	809
All diseases (except Tuberculosis) ...					
Whole carcases con- demned	—	—	—	—	—
Carcases of which some part or organ was con- demned	3	—	—	—	—
Percentage of the number inspected affected with disease other than Tuberculosis	3.191	—	—	—	—
Tuberculosis only.					
Whole carcases con- demned	—	—	1	—	2
Carcases of which some part or organ was con- demned	—	—	—	—	1
Percentage of the number inspected affected with Tuberculosis	—	—	0.840	—	0.371

Retail Sale Inspection.—There are 14 butchers' shops and five slaughter-houses, all of which are kept in a satisfactory manner. The licence of one slaughter-house was again renewed on a yearly basis. 469 visits have been paid to these premises.

Four stone of frozen lamb and 50 lbs. of Australian Chilled beef were condemned as unfit for human consumption.

Under the Slaughter of Animals Act, 1933, 16 slaughtermen were licensed for one year to slaughter animals.

Other Foods.—No other foods were condemned.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

This Act is administered by the Surrey County Council, and I am indebted to the County Medical Officer of Health for the information in the table below showing the number of samples analysed and action taken in respect of the District.

TABLE IV.
Return of Samples Analysed during Year ended 31st December, 1938.

Articles	Analysed			Adulterated or Deteriorated			Prosecutions	Convictions
	For- mal	In- formal	Total	For- mal	In- formal	Total		
Milk	47	2	49	2	—	2	1	1
Margarine ...	—	1	1	—	1	1	—	—
Sausages	1	—	1	—	—	—	—	—
Confectionery & Jam	—	2	2	—	—	—	—	—
Chocolate Roll	3	—	3	3	—	3	1*	—
Choc. Sandwich	1	—	1	—	—	—	—	—
Totals ...	52	5	57	5	1	6	2	1

* Case dismissed on payment of costs.

SHELLFISH.

Notes on Shellfish Sold in the District.

Mac Fisheries, Haslemere	{	Sell lobsters, crabs, oysters, scallops, prawns and shrimps.
„ Hindhead		These are ordered and obtained from Mac Fisheries' Headquarters, London.
Haslemere Co-operative Society, Ltd.		Sells lobsters, crabs, oysters, scallops, prawns and shrimps. Ordered and obtained from the C.W.S., Manchester.
Bicknell, Haslemere ...		Sells lobsters, crabs, oysters, scallops, prawns and shrimps. Obtained from Holland, Wholesaler, Portsmouth.
Mason, Haslemere		Sells lobsters, crabs, oysters, scallops, prawns, shrimps, cockles and winkles. Personally obtained from Billingsgate Market.
Chatt, Shottermill ...		Sells prawns and shrimps. Obtained from Grimsby.
Wren Bros., Hindhead		Sells lobsters, crabs, oysters, scallops, prawns, shrimps, winkles and whelks. Obtained from Hooper, Portsmouth, and Baxters, London.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

GENERAL.

Another year of singular freedom from infectious disease is recorded. 15 cases only were notified, including 6 of scarlet fever and 2 of diphtheria.

The graph on page 39 illustrates the incidence of infectious disease during the last eight years.

Table VI on page 38 shows the age incidence of the notified cases.

SCARLET FEVER.

Six cases were notified during the year—the same number as in 1937. Five of the cases occurred at a private school at the end of June and the beginning of July. The epidemic, however, ceased as suddenly as it began, and no further alarm was caused.

Owing to the small number of cases of scarlet fever, and the fact that the patients' circumstances did not demand it, the scheme of immunisation of contacts was not put to practical use during 1938.

DIPHThERIA.

Two cases of this disease occurred during the year. The first case proved fatal. About two months later another case was notified from the same address, and it was suspected that there might be a carrier in the house. All contacts were swabbed, the results being negative, and the family was kept under medical observation for a time. There were no further developments, however.

Diphtheria Immunisation.—The scheme of immunisation against diphtheria has continued as in the past three years. Parents and teachers continue to co-operate, and there is every reason to be satisfied with the present position. There are, indeed, very few communities with so high a percentage of school children immunised against diphtheria.

With the co-operation of the County Medical Officer and the Assistant School Medical Officers, immunisation is now offered free of charge to children attending the Infant Welfare Centres at Haslemere and Hindhead. During 1938 the number of infants immunised in this way was 62. Schick testing of these children will be carried out, wherever possible, on their attaining school age.

DIPHTHERIA IMMUNISATION AT THE ELEMENTARY SCHOOLS, HASLEMERE.

Number of children immunised since scheme commenced	Estimated number of immunised children left as a result of reaching school-leaving age	Average percentage of success as shown by Schick testing	Approximate number of children protected	Total number of children at the Elementary schools (approx.)	Percentage of children at schools who are protected against Diphtheria
997	142	93.82	802	852	94.12

Measles is gradually coming to be recognised as the serious illness that it really is.

A few cases occurred at Haslemere C. of E. School and Shotter-mill Council School in the spring and early summer.

Bronchitis and pneumonia are the most fatal sequelæ of measles, and although the measles recorded in 1938 was not of a severe type, many chest complications were reported.

Several requests were received from practitioners for convalescent serum. It is well known that measles generally confers immunity from future attacks, due to the development of a specific antidote in the blood serum. This antidote is as effective in preventing or even in curing measles if it is suitably injected into the sufferer. Accordingly the blood serum of recently-recovered measles cases can now be used as a prophylactic and as a curative agent, it being particularly valuable in treating weakly children for whom an attack of measles might well be expected to produce severe and dangerous illness, and in institutions where an outbreak of measles might result in a severe epidemic.

Appeals for volunteer donors of blood were for some time unsuccessful, but eventually a small stock of convalescent serum was obtained. This is stored under proper conditions at the Royal Surrey County Hospital, and is available on request for medical practitioners. Owing to the difficulty in obtaining supplies it is hoped that its use may be restricted to the most necessitous cases only. Since making it available only one request has been received.

It may be useful to recapitulate here the various supplies that are now available at the offices of the Medical Officer of Health in cases of emergency. **TETANUS SERUM, SNAKE ANTI-VENOM, ANTI-ANTHRAX SERUM, DIPHTHERIA ANTI-TOXIN**, and **STREPTOCOCCUS ANTI-TOXIN**, are all kept in stock, in addition to **ALUM PRECIPITATED TOXOID** for Diphtheria immunisation (and **SCHICK-TESTING MATERIAL**); and **STREPTOCOCCUS TOXIN** for Scarlet Fever immunisation, material for the **DICK-TEST** being also stocked.

Important steps were taken to ensure closer co-operation with medical practitioners throughout the District, and the system of providing information concerning prevalent infectious diseases was extended. Each week a statement is now sent to every practitioner recording diseases notified during the week, indicating the locality and whether isolated cases, minor or major epidemics, together with any notes likely to be of use in assisting prompt recognition or treatment.

Practitioners generally have co-operated by giving me informal notification of infectious diseases not ordinarily notifiable. Business "Reply Paid" forms have been issued for use in supplying such information, and the success of this scheme has amply justified the immense amount of preparation and complicated procedure necessary to introduce the system.

SCHOOL ABSENTEES.

The table below shows the numbers of children absent from school suffering, or suspected to be suffering, from any infectious or contagious disease, including contacts with cases of infectious disease.

TABLE V.
SCHOOL ABSENTEES.

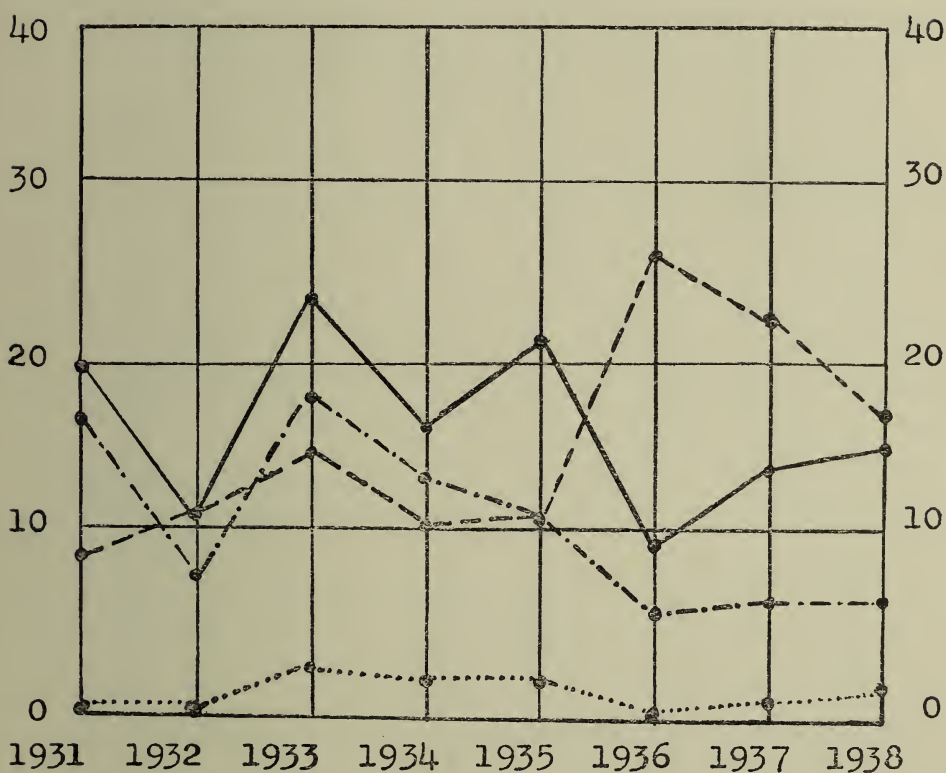
School.	Scarlet Fever.	Diphtheria.	Influenza.	Measles.	Dysentery.	Whooping- cough.	Chicken- pox.	Coughs and Colds.	Impetigo	Totals
Grayswood C. of E. ...	—	—	—	—	9	6	—	—	—	15
Haslemere C. of E. (Inf.)	1	—	—	2	—	16	5	3	—	27
Haslemere C. of E. (Sen.)	2	—	—	—	—	1	—	—	—	3
Hindhead Council ...	—	—	—	—	—	—	—	—	—	—
Shottermill Council ...	4	—	—	2	—	13	112	—	—	131
Totals ...	7	—	—	4	9	36	117	3	—	176

TABLE VI. INFECTIOUS DISEASE, 1938. AGE INCIDENCE
(other than Tuberculosis).

NOTIFIABLE DISEASE	At all Ages	At Ages—years.											Cases admitted to Hospital	Total Deaths	
		under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65			65 and over
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	2	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Enteric Fever (including Paratyphoid)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	2	—	—	—	—	—	—	—	—	—	—	—	—	—	6*
Acute Anterior Poliomyelitis	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Erysipelas...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Undulant Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	16	2	—	—	2	—	5	2	1	1	1	2	—	11	8

* This demonstrates the fact that medical attendants do not always notify cases of pneumonia.

GRAPH SHOWING INCIDENCE OF NOTIFIED INFECTIOUS DISEASES DURING THE LAST EIGHT YEARS.



————— = Total of Notified Infectious Diseases (excepting Tuberculosis).
 - - - - - = Scarlet Fever. - - - - - = Tuberculosis. = Diphtheria.

CANCER.

There were 19 deaths from malignant disease during 1938—6 male and 13 female (according to Registrar-General's figures). The age incidence of 16 of these persons whose deaths have been traced through this department is shown in the table below.

TOTAL DEATHS FROM CANCER.

Site	20-30		30-40		40-50		50-60		60-70		70-80		Over 80		Totals		Grand Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Alimentary	-	-	-	-	-	-	1	2	-	1	1	-	-	1	2	4	6
Breast ...	-	-	-	-	-	-	-	1	-	-	-	1	-	1	-	3	3
Lung ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Liver ...	-	-	-	-	-	-	-	-	-	1	1	-	-	-	1	1	2
Tongue ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other...	-	-	-	-	1	1	-	1	1	1	-	-	-	-	2	3	5
Totals ...	-	-	-	-	1	1	1	4	1	3	2	1	-	2	5	11	16

The following table shows the number of deaths from cancer during the last five years:

Year			Male	Female	Total	Death-Rate
1934	...	...	7	9	16	1.72
1935	...	...	5	9	14	1.49
1936	...	...	6	6	12	1.27
1937	...	...	5	6	11	1.15
1938	...	...	6	13	19	1.99

No arrangements are made by the Local Authority for the diagnosis and treatment of cancer. Any cases coming to our notice are referred to the Royal Surrey County Hospital, Guildford, or to London Hospitals.

Radium is available at certain of the London Hospitals, and arrangements for such treatment are made through the Surrey County Council.

The British Empire Cancer Campaign continues its efforts to enlighten the general public about this disease, and much good work is being done. There is a panel of lecturers in the Haslemere Urban

District, the Medical Officer of Health acting as the Honorary Secretary for the scheme in the District. During 1938 no requests were received for lectures to be given in this District.

PREVENTION OF BLINDNESS.

No action was necessary under Section 176 of the Public Health Act, 1936, which relates to the prevention of blindness and the treatment of persons suffering from disease of or injury to the eye.

TUBERCULOSIS.

There were 74 cases on the Register at the end of 1938—namely 27 males and 47 females.

The following table summarises the Tuberculosis Register as at 31st December, for the last six years :

Year	Pulmonary		Non-Pulmonary		Total Number on Register at December 31st
	Male	Female	Male	Female	
1933 ...	11	17	5	1	34
1934 ...	14	15	6	2	37
1935 ...	15	15	6	2	38
1936 ...	18	30	5	7	60
1937 ...	19	36	7	9	71
1938 ...	19	38	8	9	74

During 1938 there were 17 new cases (primary and others), as against 23 in 1937.

Table VII on page 42 shows the new cases and deaths in age periods—pulmonary and non-pulmonary figures are given separately.

There were 4 deaths from tuberculosis, as against 6 in 1937.

The following table shows the notifications and deaths in the District, with the corresponding rates per 1,000 of the population during the past five years :

Year	Cases Notified	Notification Rate	Deaths	Death-Rate per 1,000 of the population
1934 ...	10	1.10	4	0.43
1935 ...	11	1.18	5	0.54
1936 ...	27	2.85	5	0.53
1937 ...	23	2.41	6	0.63
1938 ...	17	1.78	4	0.42

TABLE VII. NEW CASES AND MORTALITY OF TUBERCULOSIS.

Age Periods	New Cases*				Deaths†			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Male	Female	Male	Female	Male	Female	Male	Female
0—1	—	—	—	—	—	—	—	—
1—5	—	—	—	—	—	—	—	—
5—15	—	—	—	1	—	—	—	—
15—25	2	3	2	—	—	—	—	—
25—35	—	2	—	—	—	2	—	—
35—45	—	2	—	1	—	—	—	—
45—55	2	—	1	—	2	—	—	—
55—65	1	—	—	—	—	—	—	—
65 and over	—	—	—	—	—	—	—	—
Unknown	—	—	—	—	—	—	—	—
Totals	5	7	3	2	2	2	—	—

* Of these, 11 were primary notifications, 5 were persons from other areas who had come to reside in the Haslemere Urban District during the year, and 1 was a case notified after death (i.e. from death return).

† The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was 1 in 4.

PREVALENCE OF TUBERCULOSIS IN HASLEMERE.

During the past half century the incidence of tuberculosis has diminished remarkably throughout the country as a whole. For the years 1851-1860 the death-rate due to tuberculosis was 2.75 per 1,000 per annum ; for the years 1911-1920 the figure was 1.10, a reduction to little more than one-third of the earlier figure.

This decrease in incidence of tuberculosis has been steadily progressive year by year, and is not due to any sudden alteration nor to improvements in hygiene recently effected.

It has been consequently so much the more surprising, and indeed alarming, to notice that in Haslemere the figures have for some years past been steadily increasing. Not only the total number of cases in the District, but the actual number of *new* cases notified year by year has been increasing. In 1933, when the urban district was enlarged, there were 28 cases on the register. In 1938 the figure was 74.

The death-rate from Tuberculosis has shown no corresponding increase, the figures being as follows :

<i>Year.</i>					<i>Death Rate.</i>
1933	...	...	...	...	0.43
1934	...	...	...	...	0.43
1935	...	...	...	...	0.54
1936	...	...	...	...	0.53
1937	...	...	...	...	0.63
1938	...	...	...	...	0.43

There are no industrial centres in Haslemere, no slums, little, if any, overcrowding, and the general level of living of the inhabitants may be considered rather above the average. There are no conditions known to exist which might be considered conducive to the development, but rather, on the contrary, Haslemere should be considered, and is in fact rightly held, to be a health resort.

This very fact at first suggested itself as an explanation of the increase—were not tuberculosis sufferers taking up residence in Haslemere because of its healthy conditions of living ?

Throughout the period under review the population has remained comparatively stationary. In 1933, upon the enlargement of the District, it was 9,299, whilst in 1938 the corresponding figure was 9,540. In five years, therefore, the enlarged District has increased its population by only 241, or 2.59 per cent.

Milk Supply.—The milk supply in Haslemere is good, much of the milk being produced locally, the remainder being imported from adjoining districts. There are two pasteurising plants, one a comparatively large one belonging to the Haslemere Co-operative Society, so that a considerable proportion of the milk consumed is actually pasteurised.

The proportion of pulmonary and non-pulmonary cases does not suggest that milk is important as an infecting agent. Non-

pulmonary cases account for only 17 of the total of 74 on the register at the end of 1938, i.e., 23 per cent., and the actual numbers year by year are as follows :

Year. (No. at 31st December)	Pulmonary	Non-Pulmonary	Total	Percentage of Non-Pulmonary
1933	22	6	28	21.4
1934	27	8	35	22.8
1935	32	8	40	20.0
1936	48	12	60	20.0
1937	55	16	71	22.5
1938	57	17	74	23.0

Moreover, the cases are uniformly scattered throughout the whole of the District, no locality having an undue proportion. The table on page 45 gives details of the ages and sex of cases occurring in the years 1934 to 1938 inclusive.

In order to investigate the reasons for the apparent increase in the prevalence of tuberculosis, every case at present living in Haslemere was visited individually, and my thanks are due to Mr. Shirley for undertaking this laborious task and completing it with such care.

Of the 73 cases visited, 36 were found to be natives of Haslemere or resident sufficiently long to suggest that the disease had actually developed in this District. 28 were immigrants, and the remainder of 9 cases had left the District and could not be traced.

Prior to enlargement of the District in 1933, only 24 of these cases were notified—that is, over a period of 8 years ; whilst the other 49 have been notified since 1933. Of the 24 earlier cases 16 appear to have been residents, 4 had definitely contracted the disease outside the District, and the remaining 4 cases could not be traced. The remaining 49 cases have been notified subsequent to the enlargement of Haslemere in 1933. Of these, 20 were residents, 8 were known to be tubercular before arrival, 16 were patients admitted to the Holy Cross Sanatorium, and 5 had left the District.

At the end of 1938, therefore, there were on the register a total of 36 Haslemere cases, 12 imported cases, 16 in the Holy Cross Sanatorium, and the remaining 9 cases had either left the District or could not be traced.

The table on page 46 which gives an analysis of the 73 cases investigated, illustrates the principal facts in greater detail.

Details of the number of cases on the Register at the end of each year since 1933, and the number of cases notified during the same period, are given at the beginning of this Section (see page 41).

CASES OF TUBERCULOSIS PLACED UPON THE REGISTER, HASLEMERE URBAN
DISTRICT, 1934 to 1938.

Age Group	1934				1935				1936				1937				1938				Totals				GRAND TOTALS
	Pul.		Non-Pul.		Pul.		Non-Pul.		Pul.		Non-Pul.		Pul.		Non-Pul.		Pul.		Non-Pul.		Pul.		Non-Pul.		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Under 1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1—5	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	2	2
5—15	-	-	1	1	-	-	-	-	-	-	1	-	-	2	-	-	-	1	-	-	-	-	1	5	6
15—25	1	1	-	-	-	3	-	-	1	4	-	1	1	3	-	1	2	2	2	-	5	13	2	2	22
25—35	1	1	-	-	1	3	-	-	1	6	-	1	1	4	-	-	-	3	-	-	4	17	-	1	22
35—45	-	-	-	-	1	1	-	-	1	4	-	-	-	1	2	-	2	-	1	2	8	2	1	1	13
45—55	1	-	-	-	1	-	-	-	-	2	-	-	2	1	-	-	2	-	1	-	6	3	1	-	10
55—65	1	-	-	-	-	-	-	-	-	2	-	-	1	2	-	-	1	-	-	-	3	4	-	-	7
65 & over	-	-	-	-	-	-	-	-	1	-	-	-	1	1	-	-	-	-	-	-	2	1	-	-	3
Totals	4	2	1	1	3	7	-	-	4	18	-	5	6	12	2	3	5	7	3	2	22	46	6	11	85

TUBERCULOSIS.

ANALYSIS OF 73 CASES OF TUBERCULOSIS IN THE HASLEMERE URBAN DISTRICT, VISITED INDIVIDUALLY BY SANITARY INSPECTOR, showing whether:—

- (a) Natives of Haslemere Class I.
 (b) Resident in Haslemere more than three years before notification Class II.
 (c) Notified before coming into Haslemere Urban District Class III.
 (d) Patients who have now left the District, and in respect of whom no information is available Class IV.

Date Notified.	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	Totals.
Class I	2	—	2	2	—	2	3	1	2	1	2	3	3	23
Class II	—	1	1	1	—	—	1	—	1	1	2	1	4	13
Class III	—	—	1	1	—	—	1	1	3	4	8	6	3	28
Class IV	—	1	1	—	—	—	2	—	—	—	2	3	—	9
Totals	2	2	5	4	—	2	7	2	6	6	14	13	10	73
Cases at Holy Cross Sanatorium (included in above)	—	—	—	—	—	—	—	1	2	2	6	3	2	16

It is recognised that the figures for Haslemere are small and that slight fluctuations show proportionately with greater prominence. Nevertheless there appears to be a steady and maintained increase over a period of years. For example, it should be noted that *new* notifications over the past six years, *excluding the Holy Cross Sanatorium* are :

1933	...	...	...	...	3
1934	...	...	...	...	6
1935	...	...	...	...	1
1936	...	...	...	...	14
1937	...	...	...	...	10
1938	...	...	...	...	11

No doubt improved diagnosis and readier and more complete notification by medical practitioners do account for some of the increase. No doubt, also, people nowadays are more willing to consult their doctor when tuberculosis is feared, little being heard of the old fallacy that it was something of which to be ashamed.

The figures do show that tuberculosis has increased in Haslemere during the past few years in direct contradiction of the general experience of the country as a whole. This increase is not explained by an influx of tubercular patients from outside the District.

No adequate explanation is forthcoming. There is no cause for alarm, but the situation calls for careful and close observation, and continued investigation.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1925.

No action was necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, which relates to persons suffering from pulmonary tuberculosis employed in the milk trade.

SECTION 172, PUBLIC HEALTH ACT, 1936.

No action was necessary under this section (relating to the compulsory removal to hospital of persons suffering from tuberculosis).

AIR RAID PRECAUTIONS.

Provision of Casualty Services under the Air Raid Precautions Scheme has occupied a great deal of time.

Constant alterations of official requirements, and difficulties in obtaining official approval to our suggestions, resulted in much waste of time and effort.

The original proposals undoubtedly were too elaborate and comprehensive for a District of such rural and residential character as the Haslemere Urban District, and the personnel required was unobtainable.

The response to appeals for recruiting was remarkable, and many people received instruction in Anti-Gas defence, in First Aid and in Home Nursing. It was inevitable that a large proportion of these volunteers were unsuitable for appointment under the Air Raid Precautions Scheme, either for business or personal reasons.

In order to simplify administration, enlistment of all volunteers in the St. John Ambulance Brigade was encouraged, this organisation undertaking to provide appropriate training and to staff First Aid Posts and other departments of A.R.P.

The September crisis found our plans very incomplete and imperfect. By intensive work, however, a complete working scheme was evolved and put into working order before the critical days immediately prior to the Munich Agreement.

One Emergency First Aid Post was selected, and arrangements made for its rapid emergency conversion to deal with gas and all other types of casualty.

Six First Aid Points were established, in various parts of the District—five at doctors' surgeries, and the other at a School.

A minimum of necessary equipment was purchased before the general demand made supplies unobtainable, and all staffs were appointed.

Thanks are due to the splendid help given by the officers and members of the St. John Ambulance Brigade. Their unstinted efforts alone made it possible to have a working scheme, fully staffed and on duty in readiness for any emergency.

The reduced scale of Casualty Services since approved is undoubtedly more in keeping with the needs of a district so rural in character as the Haslemere Urban District, although the tendency to centralise all services is deplored. The refusal to recognise the necessity for First Aid Points or minor dressing stations has caused consternation amongst the general public. No official First Aid services will be available at isolated spots ; much time will be lost in travelling and many unnecessary journeys to attend to trifling cases will certainly result. In times of stress and fear casualties are more likely to result from accidents than from enemy bombs or falling shrapnel. Darkness, dimming of lights on travelling vehicles, excitement, and the complete upheaval of normal life will increase the number of accidents out of all proportion to peace-time occurrences, and the existence of some First Aid services in every community is regarded as essential.

